

BEST AVAILABLE COPY

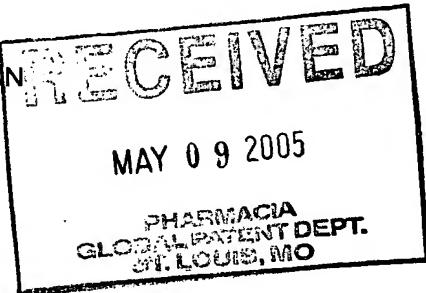
Page 1 of 2
HCU
TFW

UNITED STATES PATENT AND TRADEMARK OFFICE

UNITED STATES DEPARTMENT OF COMMERCE
United States Patent and Trademark Office
Address: COMMISSIONER FOR PATENTS
PO. Box 1450
Alexandria, Virginia 22313-1450
www.uspto.gov

| APPLICATION NUMBER | FILING OR 371 (c) DATE | FIRST NAMED APPLICANT | ATTORNEY DOCKET NUMBER |
|--------------------|------------------------|-----------------------|-------------------------|
| 10/626,166 | 07/23/2003 | Gregory E. Amidon | 01681/1/US PC 038003 |

PHARMACIA CORPORATION
Global Patent Department
5th Floor, Mail Zone 1006
575 Maryville Centre Drive
St. Louis, MO 63141



FORMALITIES LETTER



OC000000015949826

Date Mailed: 05/05/2005

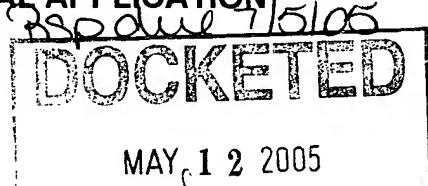
NOTICE TO FILE MISSING PARTS OF NONPROVISIONAL APPLICATION

06/28/2005 HLE333 00000019 161445 10626166

01 FC:1051 130.00 DA

FILED UNDER 37 CFR 1.53(b)

Filing Date Granted



Items Required To Avoid Abandonment:

An application number and filing date have been accorded to this application. The item(s) indicated below, however, are missing. Applicant is given **TWO MONTHS** from the date of this Notice within which to file all required items and pay any fees required below to avoid abandonment. Extensions of time may be obtained by filing a petition accompanied by the extension fee under the provisions of 37 CFR 1.136(a).

- The oath or declaration is missing. A *properly signed oath or declaration in compliance with 37 CFR 1.63, identifying the application by the above Application Number and Filing Date, is required.*
Note: If a petition under 37 CFR 1.47 is being filed, an oath or declaration in compliance with 37 CFR 1.63 signed by all available joint inventors, or if no inventor is available by a party with sufficient proprietary interest, is required.
- To avoid abandonment, a late filing fee or oath or declaration surcharge as set forth in 37 CFR 1.16(f) of \$130 for a non-small entity, must be submitted with the missing items identified in this letter.

The applicant needs to satisfy supplemental fees problems indicated below.

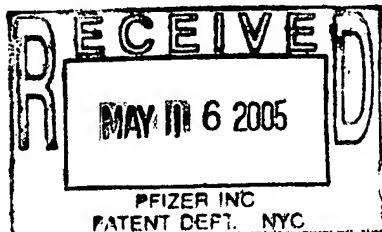
The required item(s) identified below must be timely submitted to avoid abandonment:

- Additional claim fees of \$360 as a non-small entity, including any required multiple dependent claim fee, are required. Applicant must submit the additional claim fees or cancel the additional claims for which fees are due.

SUMMARY OF FEES DUE:

Total additional fee(s) required for this application is \$490 for a Large Entity

- \$130 Late oath or declaration Surcharge.
- Total additional claim fee(s) for this application is \$360



- \$360 for multiple dependent claim surcharge.

Replies should be mailed to: Mail Stop Missing Parts
Commissioner for Patents
P.O. Box 1450
Alexandria VA 22313-1450

*A copy of this notice **MUST** be returned with the reply.*

phh

Office of Initial Patent Examination (703) 308-1202
PART 2 - COPY TO BE RETURNED WITH RESPONSE



Patent Application
Attorney Docket No. PC28053

hereby certify that this correspondence is being deposited with the United States Postal Service as first-class mail in an envelope addressed to: "BOX MISSING PARTS", Commissioner for Patents, P. O. Box 1450, Alexandria, VA 22313-1450 on this 24th day of June 2005.

By _____

(Signature of person mailing)

Andrea E. Dorigo

Reg. No. 47,532

(Typed or printed name of person)

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

IN RE APPLICATION OF: Amidon et al. :

APPLICATION NO.: 10/626,166 : Group Art Unit: 1615

FILING DATE: July 24, 2003 :

TITLE: SUSTAINED-RELEASE TABLET
COMPOSITION OF PRAMIPEXOLE

BOX MISSING PARTS

Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Sir:

RESPONSE TO NOTICE OF MISSING PARTS

Enclosed herewith are Declaration(s) and Power of Attorney(s) for the above-identified application.

The Commissioner hereby authorized to charge the appropriate fee and any additional fees required under 37 C.F.R. §§ 1.16 and 1.17, or to credit any overpayment to Deposit Account No. 16-1445. Two copies of this paper are enclosed.

A copy of the Notice to File Missing Parts is also enclosed.

Respectfully submitted,

Date: June 24, 2005

Andrea E. Dorigo
Attorney for Applicant(s)
Reg. No. 47,532

Pfizer, Inc
Patent Department, 5th Floor
150 East 42nd Street
New York, NY 10017-5612
(212) 733-1898

JUL 27 2005
PATENT & TRADEMARK OFFICEEffective on 12/08/2004
Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818)

FEE TRANSMITTAL

for FY 2005

 Applicant claims small status. See 37 CFR 1.27

Total Amount of Payment (\$ 130.00)

METHOD OF PAYMENT (check all that apply)

 Check Credit Card Money Order None Other (please identify): _____
 Deposit Account: Deposit Account number 16-1445 Deposit Account Name Pfizer Inc

For the above identified deposit account, the Director is authorized to: (check all that apply)

 Charge fee(s) indicated below. Charge fee(s) indicated below, except for the filing fee to the above-identified deposit account.
 Charge any additional fee(s) or any underpayment of fee(s) under 37 CFR 1.1.6 and 1.17 Credit any overpayments

WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038

FEE CALCULATION

1. BASIC FILING FEE

| Application Type | FILING FEES | | SEARCH FEES | | EXAMINATION FEES | |
|------------------|-------------|-----------------------|-------------|-----------------------|------------------|--------------|
| | Fee (\$) | Small Entity Fee (\$) | Fee (\$) | Small Entity Fee (\$) | Fee (\$) | Small Entity |
| Utility | 300 | 150 | 500 | 250 | 200 | 100 |
| Design | 200 | 100 | 100 | 50 | 130 | 65 |
| Plant | 200 | 100 | 300 | 150 | 160 | 80 |
| Reissue | 300 | 150 | 500 | 250 | 600 | 300 |
| Provisional | 200 | 100 | 0 | 0 | 0 | 0 |

2. EXCESS CLAIM FEES

Fee Description

Each claim over 20 (including Reissues)

Each independent claim over 3 (including Reissues)

Multiple dependent claims

| | | | |
|--------------|--------------|----------|---------------|
| Total Claims | Extra Claims | Fee (\$) | Fee Paid (\$) |
| - 20 or HP= | x | = | |

| Fee (\$) | Small Entity Fee (\$) |
|----------|-----------------------|
| 50 | 25 |
| 200 | 100 |
| 360 | 180 |

Multiple Dependent Claims

| | |
|----------|----------|
| Fee (\$) | Fee (\$) |
|----------|----------|

HP= highest number of total claims paid for, if greater than 20

| | | | |
|---------------|--------------|----------|---------------|
| Indep. Claims | Extra Claims | Fee (\$) | Fee Paid (\$) |
| - 3 or HP= | x | = | |

| | |
|----------|-----------------------|
| Fee (\$) | Small Entity Fee (\$) |
|----------|-----------------------|

HP= highest number of total claims paid for, if greater than 3

3. APPLICATION SIZE FEE

If the specification and drawings exceed 100 sheets of paper, the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).

| | | | |
|--------------|--------------|------------------------------|---------------|
| Total Sheets | Extra Sheets | Fee (\$) | Fee Paid (\$) |
| - 100= | /50 | (round up to a whole number) | x |

| | |
|----------|----------------|
| Fee (\$) | Fees Paid (\$) |
|----------|----------------|

4. OTHER FEE(S)

Non-English Specification, \$130 fee (no small entity discount)

Other: Late Filing Surcharge

Fees Paid (\$)

130.00

Submitted

| | | | | | |
|---------------------|-------------------------|------------------|--------|-----------|----------------|
| Name (Printed/Type) | <u>Andrea E. Dorigo</u> | Registration No. | 47,532 | Telephone | (212) 573-1898 |
|---------------------|-------------------------|------------------|--------|-----------|----------------|

Signature

This collection of information is required by 37 CFR 1.17 and 1.27. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and /or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

If you need assistance in completing the form, call 1-800-pat-9199 and select option 2.

Doc. #250337